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Application Number	08/659,831
Filing Date	12/31/99
First Named Inventor	SHAFFER 4-3
Art Unit	2803
Examiner Name	HYUN, Soon D
Attorney Docket Number	20-271

I hereby revoke all previous powers of attorney given in the above-identified application.

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Scott M. Lellon</i>		
Name	Agere Systems inc.		
Date	March 3 2005	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

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